



3742  
Atty. Dkt. No. 047711-0214

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ronald J. Lebel et al.

Title: AMBULATORY MEDICAL  
APPARATUS AND METHOD  
USING A ROBUST  
COMMUNICATION  
PROTOCOL

#130  
10/14/03  
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OCT 09 2003

TECHNOLOGY CENTER R3700

768  
Appl. No.: 09/786,035

Filing Date: 01/22/2001

Examiner: Daniel Leon Robinson

Art Unit: 3742

CERTIFICATE OF MAILING

Mail Stop NON-FEE AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Commissioner:

I hereby certify that the following paper(s) and/or fee along with any attachments referred to or identified as being attached or enclosed are being deposited with the United States Postal Service as First Class Mail under 37 C.F.R. § 1.8(a) on the date of deposit shown below with sufficient postage and in an envelope addressed to the Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.

1. Amendment Transmittal Letter
2. Amendment and Response to Restriction Requirement dated September 5, 2003
3. Postcard

Respectfully submitted,

Date October 3, 2003

By Irvin C. Harrington, III

FOLEY & LARDNER  
Customer Number: 23392  
Telephone: (310) 975-7963  
Facsimile: (310) 557-8475

Irvin C. Harrington, III  
Attorney for Applicant  
Registration No. 44,740



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AMENDMENT TRANSMITTAL

Mail Stop NON-FEE AMENDMENT  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[ ] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.

[ ] Assertion of Small Entity status is enclosed.

[ X ] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	43	<input type="checkbox"/>	43	=	0	x	\$18.00	=	\$0.00
Independents:	4	<input type="checkbox"/>	4	=	0	x	\$86.00	=	\$0.00
First presentation of any Multiple Dependent						+	\$290.00	=	\$0.00

## Claims:

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 CLAIMS FEE TOTAL: = \$0.00
 

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- ☐ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<hr/>		
<input type="checkbox"/>	Extension for response filed within the first month:	\$110.00
		<hr/> \$0.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$420.00
		<hr/> \$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$950.00
		<hr/> \$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,480.00
		<hr/> \$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$2,010.00
		<hr/> \$0.00
	EXTENSION FEE TOTAL:	<hr/> \$0.00
<hr/>		
<input type="checkbox"/>	Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00
		<hr/> \$0.00
	CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:	<hr/> \$0.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):	<hr/> \$0.00
	TOTAL FEE:	<hr/> \$0.00
<hr/>		

- ☐ Please charge Deposit Account No. 50-0872 in the amount of \$0.00. A duplicate copy of this transmittal is enclosed.

- ☐ A check in the amount of \$0.00 is enclosed.

- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any

extensions of time are needed for timely acceptance of papers submitted herewith,  
applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes  
payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address  
indicated below.

Respectfully submitted,

Date 10-3-03

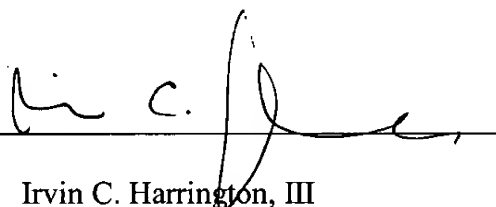
FOLEY & LARDNER

Customer Number: 23392

Telephone: (310) 975-7963

Facsimile: (310) 557-8475

By

A handwritten signature in black ink, appearing to read "Irvin C. Harrington, III", written over a horizontal line.

Irvin C. Harrington, III  
Attorney for Applicant  
Registration No. 44,740



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AMENDMENT AND RESPONSE TO RESTRICTION REQUIREMENT

Mail Stop NON-FEE AMENDMENT  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

This communication is responsive to the Non-Final Office Action dated September 5, 2003, concerning the above-referenced patent application.

**Amendments to the Specification** begin on page 2 of this document.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 6 of this document.

**Remarks/Arguments** begin on page 15 of this document.

Please amend the application as follows: